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# THE AMERICAN JOURNAL OF NURSING

VOL. VIII

NOVEMBER, 1907

NO. 2

## EDITORIAL COMMENT



### THE LOCAL ADVANTAGE OF THE NATIONAL CONVENTION

THE secretary of the Associated Alumnae was recently asked to prepare for the transportation committee a statement showing the attendance at the conventions of the last four years from various parts of the country. This table when completed was interesting and enlightening. When the convention was held at Philadelphia, in 1904, the largest attendance was from the middle states,—New York, Pennsylvania, Maryland, etc. Next in numbers came delegates and visitors from New England, then from the middle west (Illinois, Indiana and Michigan). There were very few from the far west, only two (who registered) from the south, and none (registered) from Canada. In 1905 the association met at Washington, D. C., and the distribution of delegates and visitors was about the same, but the numbers were slightly increased, and those from the middle west equalled the number from New England. There were a few more from the far west, five from the south, and none from Canada. In 1906, at Detroit, there was a great change in the sections of the country most fully represented. An overwhelming majority came from the middle west, the middle states came next, the attendance from the far west was nearly four times as great as before, there were five from the south, and thirteen from Canada,—showing that Canada benefited by having the convention held so near its borders. At the convention in Richmond this year, the representatives from the south and from the middle states were

equal. The far west came next, but had not so many as at Detroit, while the middle west and New England were about equal, New England sending more than for the three previous years, while Canada dropped to one representative. The total registered attendance was greatest at Detroit, but one can see how much a community may benefit by having the convention in its midst by noting how the southern registrations leaped from three and five in other localities to one hundred and forty-four in its own.

It is hoped that a great effort will be made by each association to send a delegate to California next year. Some societies are taking time by the forelock and are already giving entertainments to raise the needed funds for the long journey. The California associations have always been most generous in sending delegates east, and western nurses generally are more willing to go east than eastern ones are to go west.

A man who had spent some years in Siam, in relating stories of the Siamese, stated that their minds seemed to be of another order than ours, their methods of reasoning were so different. As an illustration, he said that if a Siamese knew the distance from A. to B., no human being could convince him that the distance from B. to A. could be known without measuring. This curious mental process does not seem to us to be so distinctly Siamese, after all; almost all dwellers in the east are stubborn in the belief that the distance from California to New York and the expense of the journey are far less than the distance and expense from New York to California.

In many cases if an association which feels unable to pay all the expenses of a delegate to California would announce early in the season that it would pay part of the cost, setting aside a given sum, and should ask for a volunteer who would represent the association, paying part of her own expenses, such a one could be found,—though it might prove impossible to pick her up hurriedly at the eleventh hour. She should have time to make arrangements ahead as to her work and personal affairs.

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### THE OPSONIC INDEX.

WE are presenting this month as our leading article a paper on one of the very advanced scientific medical subjects. As this has seemed an abstruse subject for nurses we have waited to secure a paper in which the matter should be presented in simple and untechnical language, comprehensible by the most humble of our readers.

It is being generally conceded that women physicians are doing

specially fine work in laboratory research which requires great exactness in detail, and judging from this paper which has been prepared by two women and from those contributed by Dr. Potter, we are inclined to think that in the interpretation of intricate medical subjects for the instruction of nurses, teachers, and women generally, women physicians have before them a special educational mission.

There has been always in medicine a general air of secrecy and mystery, a hiding of facts from the layman. Now, inspired possibly by ex-President Cleveland, and under the leadership of Dr. Richard Cabot and other eminent men, the public is beginning to be treated as possessing intelligence and the nurse and teacher become important instructors in the work of prophylaxis.

Apropos of Dr. Potter's articles, word has recently come to us that her articles published in the *JOURNAL* have been directly the cause of the introduction of individual communion cups in two churches.

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#### SUBJECTS FOR ALUMNÆ PROGRAMS

WE would again call the attention of alumnae workers to the president's address at the Richmond meeting, found on page 815 of the August number of the *JOURNAL*. From this may be obtained suggestions for any number of alumnae programs.

From reports that are coming to us we believe that this is going to be a red letter year for the course in hospital economics at Teachers' College. Miss Nutting is now established in her new position with Miss Hedges as her special assistant in the Economics work. The committee appointed at the Richmond meeting with Miss Deans as chairman is about to issue a circular giving information to the local societies, and we shall hear directly from Miss Nutting herself from time to time of the progress which is being made and the special needs of the course.

We hope that the six thousand dollars pledged may materialize in twice that amount at least.

A good field for home missionary work for the alumnae associations is almshouse nursing. If, through a committee, each society would investigate the conditions of that institution in its own locality, without waiting for a special appeal from the national committee of which Miss Dock is chairman, there would then be no delay in securing coöperation and the local association would become familiar with conditions, which is the first important step in this movement.

We have received several communications from officers of alumnae

associations asking what, if any, action is being taken as the result of the discussion at the Richmond meeting in regard to the matter of asking for representation by the *alumnæ* on training-school boards.

There seems to be some misunderstanding in regard to this matter which we are glad to take this opportunity of explaining to any who may not be sure what was intended by the suggestion. It is customary in all educational institutions for the board of trustees or managers to be composed wholly or in large part of the graduates of the institution. Training schools for nurses begin to be classed as educational institutions, they are so classified by the National Bureau of Education. In New York state, under the nursing statute of 1903, training schools for nurses are directly under the supervision of the board of education, and with the development of state registration this recognition is bound to develop.

In recognition of such development it seems only right that there should be representation from the *alumnæ* associations on the boards of nursing schools. The discussion at the Richmond meeting was suggestive with the intention that each *alumnæ* association should courteously request such representation on the board of its own school. There was no formula agreed upon, although it was suggested that the first fall meeting was a good time for unanimous action,—the matter being left to be decided by each society as to what might seem the best way of presenting the matter.

We think this is a subject to be considered by all the affiliated societies. In many instances it has been thoughtlessness on the part of the hospital managers of the growing importance of nursing schools as a whole.

Even if the request is not granted in the beginning, the seed will have been planted and results will surely follow later on.

#### REÖRGANIZATION OF ALUMNÆ ASSOCIATIONS

FROM reports which come to us we believe that many of the older *alumnæ* associations which have been leaders in the past are suffering from a lethargy which it seems impossible to shake off, the older workers are dropping out, and the younger ones have not taken up the work in the past and so are not in touch with it and it seems impossible to get them to take hold.

A scheme of reörganization has occurred to us which might be tried in some of the large societies,—that is to put all the business affairs of the association into the hands of a board of directors. Let this board be large, composed of one representative from each class that

has graduated, and of the officers. This would bring every class directly in touch with the work of the association and might result in a good many small class organizations which would be pleasant socially. When any class failed to elect a representative, either by its members coming together or conferring by letter, a representative woman from that class could be chosen for a director by the officers. These directors should serve for at least two years, one-half retiring each year, so that one-half the members of the board of directors would always be old ones familiar with the work, and one-half new ones becoming initiated.

The advantages of such an arrangement seem to us to be many. It brings a large number of nurses of all ages into active work. It is a more prompt and efficient way of doing business and the opportunities for opposition and disagreement would be lessened. It would relieve the general *alumnæ* meeting of the business details, which are so uninteresting to many nurses that they stay away. The meetings, being freed from all business, could be devoted to educational and social work; they could be held less often, if that seemed best, and could be made really worth while when they did occur. A directors' report would be given to the association annually and there might be a proviso that no new disposition of the funds of the society should be made without appealing to the whole membership for endorsement.

Almost all large organizations, social, or educational, are managed by boards of directors; there seems no reason why nurses' societies would not do well to adopt such a plan. It would be interesting to see whether such a change would not arouse some of the sleeping forces.

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## RESULTS OF AFFILIATION

It was announced recently in our pages that the Illinois Training School and the Presbyterian School for Nurses in Chicago had affiliated with the Elgin hospital for the insane, giving their senior nurses the benefit of some experience in this branch of nursing. The results, as will be seen on another page, are that two of this year's graduates of the Presbyterian School have been placed in charge of the nursing in two of the largest state hospitals for the insane in Illinois, Elgin and Kankakee. Each of these nurses had taken this affiliation training and so they are better prepared to fill such positions acceptably than the graduates of general hospitals in the east referred to in recent articles by Dr. Russell and Miss May as having been so disappointing that the officials of such hospitals have ceased to try to put into these positions any but their own graduates.

This exchange of service by which the general nurse broadens her knowledge of mental nursing and the nurse of the insane hospital gets more general work in medical cases is going to be of great benefit to the nurses themselves, to their patients, and to the training schools of both institutions.

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### WORK AMONG THE NAVAJO INDIANS

Too late for insertion in the missionary department comes a letter from Miss Eyre of Denver, written from the Hospital of the Good Shepherd, Fort Defiance, Arizona, a mission hospital for the Navajo Indians, where she went to substitute for three months and has remained eight, the work has proved so interesting. Her duties in Denver call her back and she appeals to the JOURNAL readers for a volunteer to take her place,—an Episcopalian, as the work is supported by that Church.

There are from eight to ten patients, on an average, under her care. The nurse would receive five hundred dollars a year and her board. The hospital is thirty miles from Gallup, N. M., the nearest railroad station, and one mile from Fort Defiance. The regular agency physician attends the patients. Miss Eyre says of the work: "It is a fine post-graduate experience for a nurse as she has to be interne, druggist, surgical assistant, and oftentimes prescribing physician when the doctor goes off on long trips over the reservation. We need funds very much as well as a nurse." She describes training a young Indian girl, who speaks English, as an assistant, whom she finds more apt than many a white probationer.

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### A TWICE TOLD TALE

WE have again to call the attention of the officers of societies to the fact that the pages of the JOURNAL close absolutely on the 18th day of the month preceding the date of issue, and that announcements and programs of meetings to be held or reports of meetings that have been held must be in the hands of the editor-in-chief at Rochester before that date.

Where societies are depending upon the JOURNAL for the announcement of the date of meetings to be held within the first five days of the month, such announcements should be made in the JOURNAL of the preceding month, for while it is our rule that the JOURNAL shall be mailed on the first day of the month to all subscribers, an intervening

holiday, Sunday coming at the month end, with the regular half holiday in the printing office, and various accidents which may occur either in the publishing or printing office, make it impossible for us to guarantee that the JOURNAL will always be in the hands of all subscribers, especially those at a distance, in time for meetings which are to take place during the early days of a month. We would suggest that announcements should be made briefly two months in advance and given in fuller detail one month in advance as nurses are frequently away from their headquarters and may not see their magazines with monthly regularity.

When there is not time for a full official report between the date of the holding of a meeting and the close of the JOURNAL pages on the 18th of the month, we would suggest that a brief notice giving the general trend of the meeting should be sent at once to the editor to be followed by a full report the following month.

An incident has recently come to our notice of a very important meeting which failed of its purpose because no announcement was made through the JOURNAL and the attendance was not sufficient to in any way repay for the hard work done in preparation for it. Not only were the conveners of the meeting grievously disappointed, but many who would have attended it missed the opportunity.

Another point which is not fully understood by organizations of nurses is that the JOURNAL makes no charge for such announcements or reports, although it must sometimes claim the privilege of condensing reports which are too lengthy.

Any account of work of nurses which is suggestive or of general interest the JOURNAL gladly publishes, and it is not necessary that an association shall be affiliated with the national society or that there shall be any formal connection with the JOURNAL to be granted this privilege.

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### A VISIT TO MISS NIGHTINGALE

DURING her stay in England Miss Nutting was privileged to spend a quiet half hour with Miss Nightingale, who listened with the deepest interest to all she could tell her of nursing affairs in America. She says: "Notwithstanding her great age, eighty-seven years, Miss Nightingale seemed to me wonderfully sympathetic and as if an unquenchable spirit still shone in her eyes and filled her voice. I have never been more profoundly affected."

The visit was of so personal a nature that Miss Nutting refrains from giving it further publicity, but the fact that one of our colleagues



has so recently been in Miss Nightingale's presence comes to us like an inspiration.

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### MISS McISAAC'S NEW BOOK

THE first of Miss McIsaac's series of text-books, entitled *Primary Nursing Technique*, has come to hand from the press of the MacMillan Company, New York, and in every way meets our expectations. As our reviewing editor has stated, it is quite unlike any of the text books of nursing that we have had previously as it deals exclusively with that simple nursing technique which is the foundation of all that a nurse may learn later and which is specially intended for teaching by demonstration in preparatory classes. It is first and last practical, easy to teach from, and the comfort of the patient is the keynote of the book. Not only is the inside most enticing but it is bound in a most serviceable and artistic shade of olive brown, suitable for daily use, but harmonious with such surroundings as we know it will frequently find. There runs through the book that magnetic touch that only Miss McIsaac's pen can give.

It is in our opinion a most valuable acquisition to the library of books written by nurses for nurses. Miss McIsaac has already commenced work on a second volume dealing with subjects that follow in natural sequence.

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### THE NEW YORK STATE MEETING

THE New York state meeting was held at Syracuse, October 15 and 16, with a good attendance. A request had been sent out by the Education Department to superintendents of training schools and also to the boards of managers connected with their schools asking that they attend this meeting for a conference with the training-school inspector, Miss Alline. This resulted in a large attendance of these women who gathered in special session at a time not given to the general meeting, and it is hoped to make the state meeting a yearly opportunity for such conference.

The program was carried out as planned with interesting papers and discussions. It was decided to give two hundred and fifty dollars to the Associated Alumnae for the JOURNAL purchase fund, and a like amount to the hospital economics endowment fund with two hundred dollars for this year's current expenses.

Mrs. Harvey Burrill and Miss Lightbourne of Syracuse were elected

president and treasurer for the coming year, and Miss Frida Hartman of Brooklyn was reelected secretary.

DR. BARROWS' PAPER

The paper which touched upon the subject of broadest interest was that by Dr. Barrows of Buffalo on "A Physician's Advice on Caring for People of Moderate Means." It was written in a most cordial kindly spirit, he had spent much pains in getting written opinions on the topic from many other physicians, and the result was a consensus of medical advice which was both interesting and valuable. The remedies advocated by these consulting physicians were an extension of the systems of visiting and hourly nursing and the introduction of trained assistants, in the hospital and out.

The discussion, led by Miss Damer, and entered into by many others, brought out the fact that trained attendants do not stay in the class chosen for them but, as soon as a little experience has established confidence, assume the dress, title, and pecuniary value of the trained nurse, for this reason the nurses present felt that they could not endorse this plan. One superintendent stated that it would undermine the whole system of training nurses for the probationers who started work side by side with these attendants would rebel at spending so much longer time in training when these women after six months were ready for work.

Some of the men whom Dr. Barrows quoted accused nurses of the spirit of the trades-unions in sitting at home idle, waiting for a call, yet refusing to go where there is need for their services at reduced rates. Miss Damer replied to this by saying that the characteristic of a trades-union is the fixing of prices. A plumber or carpenter is forbidden by his union to work for less than the established rate. She had never heard of a nurses' association which established a rate for its members. The reports of two associations given elsewhere in this magazine, record just such action, which seems to us beneath the dignity of these societies, but we believe we are right in thinking that these nurses have merely changed the average rate to be charged in those localities and that no one of the members is less free than before to lower her charges where there is need or to give her services when she can afford to do so. This is analogous to the action taken by some medical societies for the fixing of fees. We have at hand the table of twenty-eight items recommended for adoption by the Ontario County Medical Society, October 30, 1906, in which no provision for reduction of rates or giving of services is provided for, though undoubtedly the worthy practitioner

will continue as before to devote himself unselfishly to the relief of those in need of his services without stopping to consult his schedule of fees.

To return to Miss Damer's remarks, she said: "Where can you find more of a trades-union spirit than in the New York Medical Society. Nurses do not go into court to fight those who have not graduated from a training school." She added that the whole burden of caring for these people at reduced rates falls on the shoulders of the private duty nurse who is criticised on the one hand for not saving money for the future and on the other hand for not giving her services more often. She suggested that hospitals should do their share by spending part of the funds at their disposal in less costly equipment, furnishing, instead, rooms which could be set apart for patients of moderate means at rates they could afford to pay without thrusting them into the ranks of charity patients.

Dr. Barrows warned nurses to beware of the disloyal physician and the disloyal registrar who are willing to recommend untrained women without stating them to be such. In this connection let us say that in discussions on this subject with various nurses, we have over and over been told that one of the reasons why they can not reduce their rates is that the disloyal doctor will take advantage of their reduced charge to add to his own fee. In many cases where a nurse has had such an experience, she is forced to make the lowering of her fee a secret between herself and her patient and obtains no credit for her charity.

Dr. Barrows expressed surprise that no one suggested state registration as a protection from the impostor. Several nurses in charge of directories emphasized the fact that nurses in general are not getting the benefit they might from state registration through mere neglect to use the letters they have fought so hard to win. If all lists of nurses, in nurses' directories, and in city or telephone directories, showed by the use of these letters which were registered nurses and which were not, we should be getting daily more practical benefit from our state laws. It is not to be desired that a nurse should write R. N. after her name on all occasions, but this should be added to her signature on a professional card, if she uses one, also in all official correspondence on nursing affairs. We are sometimes asked how we can make the public realize that there are registered nurses. If every nurse who is registered, and there are now thousands, used her title at proper times and places the public would soon know what the letters stand for. It is a curious fact that many of our best workers along legislative lines, those who

have made great sacrifices for their profession, are neglecting this duty through carelessness or inertia.

Registration like any other great movement must work slowly. The immediate correction of all existing abuses has never been promised by workers in this field.

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### MISS FULMER JOINS THE JOURNAL STAFF

WITH the January number we are to open a department of Visiting Nursing, under the editorship of Miss Harriet Fulmer, of Chicago. The *Visiting Nurse Quarterly* will be continued as a local magazine with one of Miss Fulmer's assistants in charge.



IN an article in *Charities* on Tuberculosis and the Schools, Dr. John H. Lowman of Cleveland says:

In order to control tuberculosis during the school age it is necessary:

1. To discover through the records of the municipality and public institutions the children who are infected and those who live in infected houses.
2. To examine and classify the individuals thus found and place the contagious cases in sanatoria and the others in separate schools.
3. To develop the hygienic surroundings of these separate schools to the highest pitch of excellence.
4. To specialize these children even during the vacations by referring them to the special consideration of outing societies.
5. To provide physicians who will at stated intervals examine the children and report to the supervisors the conditions found.
6. To use the utmost precautions for the protection of the teachers.
7. To introduce systematic courses on hygiene and tuberculosis into the curriculum of the schools.
8. To provide sanatoria for children.

The difficulties to be overcome are:

1. The examination of thousands of children in order to detect and classify those affected with tuberculosis.
2. Provision for the contagious cases in sanatoria for children.
3. Teachers for the classes of children with latent non-contagious tuberculosis.
4. Vigilant medical supervision of the tuberculosis classes.